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## BIB DATA SHEET

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10/544,167	07/29/2005	604	3763	5114-00004

**APPLICANTS**  
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**\*\* CONTINUING DATA \*\*\*\*\***  
 This application is a 371 of PCT/IL04/00099 02/02/2004

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***  
 ISRAEL 154243 02/02/2003

**\*\* IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* \* SMALL ENTITY \*\***

Foreign Priority claimed 35 USC 119(a-d) conditions met Verified and Acknowledged	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No /VICTORIA P CAMPBELL/ Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	STATE OR COUNTRY CO	SHEETS DRAWINGS 6 5	TOTAL CLAIMS 28 26	INDEPENDENT CLAIMS 1
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**TITLE**  
 Drug infusion device

<b>FILING FEE RECEIVED</b> 650	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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